Medical Surgical Nursing 10th Edition Ignatavicius Workman Test Bank

Chapter 01: Overview of Professional Nursing Concepts for Medical-Surgical Nursing Ignatavicius: Medical-Surgical Nursing, 10th Edition

MULTIPLE CHOICE

- A nurse is earing for a postoperative client on the surgical unit. The client's blood pressure was 142/76 mm Hg 30 minutes ago, and now is 88/50 mm Hg. What action would the nurse take first?
 - a. Call the Rapid Response Team.
 - b. Document and continue to monitor.
 - Notify the primary health care provider.
 - Repeat the blood pressure in 15 minutes.

ANS: A

The purpose of the Rapid Response Team (RRT) is to intervene when clients are deteriorating before they suffer either respiratory or cardiac arrest. Since the client has manifested a significant change, the nurse would call the RRT. Changes in blood pressure, mental status, heart rate, temperature, oxygen saturation, and last 2 hours' urine output are particularly significant and are part of the Modified Early Warning System guide. Documentation is vital, but the nurse must do more than document. The primary health care provider would be notified, but this is not more important than calling the RRT. The client's blood pressure would be reassessed frequently, but the priority is getting the rapid care to the client.

DIF: Applying TOP: Integrated Process: Communication and Documentation KEY: Rapid Response Team (RRT). Clinical judgment

MSC: Client Needs Category: Physiological Integrity: Physiological Adaptation

- 2. A new nurse is working with a preceptor on a medical-surgical unit. The preceptor advises the new nurse that which is the priority when working as a professional nurse?
 - Attending to holistic client needs
 - Ensuring client safety
 - Not making medication errors
 - d. Providing client-focused care

ANS: B

All actions are appropriate for the professional nurse. However, ensuring client safety is the priority. Health care errors have been widely reported for 25 years, many of which result in client injury, death, and increased health care costs. There are several national and international organizations that have either recommended or mandated safety initiatives. Every nurse has the responsibility to guard the client's safety. The other actions are important for quality nursing, but they are not as vital as providing safety. Not making medication errors does provide safety, but is too narrow in scope to be the best answer.

DIF: Understanding TOP: Integrated Process: Nursing Process: Intervention KEY: Client safety
MSC: Client Needs Category: Safe and Effective Care Environment: Safety and Infection Control

- A nurse is orienting a new client and family to the medical-surgical unit. What information
 does the nurse provide to best help the client promote his or her own safety?
 - Encourage the client and family to be active partners.
 - b. Have the client monitor hand hygiene in caregivers.
 - c. Offer the family the opportunity to stay with the client.
 - Tell the client to always wear his or her armband.

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Table of Contents Ignatavicius And Workman Study Guide

- 1. Understanding the eBook Ignatavicius And Workman Study Guide
 - The Rise of Digital Reading Ignatavicius And Workman Study Guide
 - Advantages of eBooks Over Traditional Books
- 2. Identifying Ignatavicius And Workman Study Guide
 - Exploring Different Genres
 - o Considering Fiction vs. Non-Fiction
 - Determining Your Reading Goals
- 3. Choosing the Right eBook Platform
 - Popular eBook Platforms
 - Features to Look for in an Ignatavicius And Workman Study Guide
 - User-Friendly Interface
- 4. Exploring eBook Recommendations from Ignatavicius And Workman Study Guide
 - Personalized Recommendations
 - Ignatavicius And Workman Study Guide User Reviews and Ratings
 - Ignatavicius And Workman Study Guide and Bestseller Lists

- 5. Accessing Ignatavicius And Workman Study Guide Free and Paid eBooks
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 - Ignatavicius And Workman Study Guide eBook Subscription Services
 - Ignatavicius And Workman Study Guide Budget-Friendly Options
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 - Highlighting and Note-Taking Ignatavicius And Workman Study Guide
 - Interactive Elements Ignatavicius And Workman Study Guide
- 8. Staying Engaged with Ignatavicius And Workman Study Guide
 - o Joining Online Reading Communities
 - Participating in Virtual Book Clubs
 - Following Authors and Publishers Ignatavicius And Workman Study Guide
- 9. Balancing eBooks and Physical Books Ignatavicius And Workman Study Guide
 - Benefits of a Digital Library
 - o Creating a Diverse Reading Collection Ignatavicius And Workman Study Guide
- 10. Overcoming Reading Challenges
 - o Dealing with Digital Eye Strain
 - Minimizing Distractions
 - Managing Screen Time
- 11. Cultivating a Reading Routine Ignatavicius And Workman Study Guide
 - Setting Reading Goals Ignatavicius And Workman Study Guide
 - Carving Out Dedicated Reading Time
- 12. Sourcing Reliable Information of Ignatavicius And Workman Study Guide
 - o Fact-Checking eBook Content of Ignatavicius And Workman Study Guide
 - Distinguishing Credible Sources
- 13. Promoting Lifelong Learning

- Utilizing eBooks for Skill Development
- Exploring Educational eBooks
- 14. Embracing eBook Trends
 - Integration of Multimedia Elements
 - Interactive and Gamified eBooks

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